Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF DELAWARE		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is ar amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Theresa First name Lynn	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Williams Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1018	

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Debtor 1 Theresa Lynn Williams Case number (if known)

		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)		☐ I have not used any business name or EINs.  Business name(s)		
		EINs		EINs		
5.	Where you live	153 Boggs Run Dover, DE 19904		If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code  Kent		Number, Street, City, State & ZIP Code		
		County		County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code		Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Del	otor 1	Theresa Lynn Will	iams			Case number (if known)		
Par	t 2:	Tell the Court About	our Bankruptc	y Case				
7.	Bank	chapter of the cruptcy Code you are			of each, see <i>Notice Required by</i> coage 1 and check the appropriate	otice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy eck the appropriate box.		
	cnoc	sing to file under	Chapter 7					
			☐ Chapter 11					
			☐ Chapter 12					
			☐ Chapter 13					
_								
8.	How	you will pay the fee	about ho order. If y	w you may pay. Typid	cally, if you are paying the fee yo	k with the clerk's office in your local court our with cash, cashier's calf, your attorney may pay with a credit calf.	heck, or money	
			☐ I need to	pay the fee in insta		n, sign and attach the Application for Indi	viduals to Pay	
				•	(Official Form 103A).	only if you are filing for Chapter 7. By lav	v a judae mav	
			but is not applies to	required to, waive your family size and	our fee, and may do so only if you I you are unable to pay the fee in	ur income is less than 150% of the official installments). If you choose this option, y ial Form 103B) and file it with your petition	poverty line that ou must fill out	
9.	Have	you filed for	■ No.					
		ruptcy within the 3 years?	☐ Yes.					
	iast	yours.	Dist	rict	When	Case number		
			Dist		When			
			Dist		When	Case number		
10.		any bankruptcy s pending or being	■ No					
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.					
			Deb	tor		Relationship to you		
			Dist	rict	When	Case number, if known		
			Deb	tor		Relationship to you		
			Dist	rict	When	Case number, if known		
11.		ou rent your lence?	■ No. Go	to line 12.				
			☐ Yes. Ha	s your landlord obtain	ned an eviction judgment agains	t you?		
				No. Go to line 12	2.			
				Yes. Fill out <i>Initi</i> this bankruptcy		<i>ludgment Against You</i> (Form 101A) and fi	le it as part of	

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Deb	otor 1 Theresa Lynn Will	liams			Case number (if known)
Par	Report About Any Bu	sinesses	You Ow	n as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	siness
	A sole proprietorship is a				
a S a	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	ber, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
					ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	9
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you in ns, cash-f S.C. 1116	ndicate that you are flow statement, and f (1)(B).	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am	not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazard	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs			diate attention is	
	immediate attention?		needed	, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	is the property?	Number Street City State 9 7in Code
					Number, Street, City, State & Zip Code

Debtor 1 Theresa Lynn Williams

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Theresa Lynn Wi	lliams		Case number (if	known)		
Par	t 6: Answer These Ques	tions for R	eporting Purposes				
	What kind of debts do you have?	16a.	Are your debts primarily consur	rour debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an dual primarily for a personal, family, or household purpose."			
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.		ss debts? Business debts are debts than or through the operation of the busines			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe th	at are not consumer debts or business d	ebts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will	■ Yes.		u estimate that after any exempt property e to distribute to unsecured creditors?	r is excluded and administrative expenses		
	be available for distribution to unsecured creditors?	I	Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	<b>=</b> \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	<b>=</b> \$100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
Par	t 7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		bankrupt and 357	cy case can result in fines up to \$25 1.	ealing property, or obtaining money or pr 50,000, or imprisonment for up to 20 year	roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Theres	resa Lynn Williams a Lynn Williams e of Debtor 1	Signature of Debtor 2			
		Executed	d on <b>January 1, 2020</b> MM / DD / YYYY	Executed on MM / D	D / YYYY		

	Case 20-10001-BLS	Doc 1	Filed 01/01/20	Page 7 of 57	
Debtor 1 Theresa Lynn Wil	liams		Ca	ase number (if known)	
For your attorney, if you are represented by one	I, the attorney for the debtor(s) na under Chapter 7, 11, 12, or 13 of for which the person is eligible. I	title 11, Unite	ed States Code, and have	explained the relief available	under each chapter
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4 schedules filed with the petition is	1)(D) applies			
	/s/ Christina Pappoulis		Date	January 1, 2020	
	Signature of Attorney for Debtor			MM / DD / YYYY	
	Christina Pappoulis				
	Printed name				<u>.                                      </u>
	Gregory & Pappoulis				
	Firm name				<u>.                                      </u>
	5307 Limestone Rd.				
	Suite 103				
	Wilmington, DE 19808				
	Number, Street, City, State & ZIP Code				
	Contact phone 302-421-9101		Email address	ninapappoulis@bg	plegal.com
	4444 DE				
	Bar number & State			<del></del> -	

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court District of Delaware

In re	Theresa Lynn Williams		Case No.		
	-	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSAT	ION OF ATTORN	EY FOR DE	BTOR(S)	
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cerompensation paid to me within one year before the filing of the e rendered on behalf of the debtor(s) in contemplation of or in contemplation.	petition in bankruptcy, or	agreed to be paid	to me, for services render	ed or to
	For legal services, I have agreed to accept		\$	1,160.00	
	Prior to the filing of this statement I have received		\$	1,160.00	
	Balance Due		\$	0.00	
2. \$	<b>335.00</b> of the filing fee has been paid.				
3. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. <b>I</b>	I have not agreed to share the above-disclosed compensation	with any other person unl	ess they are mem	pers and associates of my	law firm.
	☐ I have agreed to share the above-disclosed compensation wit copy of the agreement, together with a list of the names of the				rm. A
6. I	n return for the above-disclosed fee, I have agreed to render leg	al service for all aspects of	f the bankruptcy c	ase, including:	
b c.	Analysis of the debtor's financial situation, and rendering adv. Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and c [Other provisions as needed]	affairs and plan which ma	ay be required;		ey;
	Negotiations with secured creditors to reduce to reaffirmation agreements and applications as n 522(f)(2)(A) for avoidance of liens on household	eeded; preparation an			
7. B	y agreement with the debtor(s), the above-disclosed fee does no Representation of the debtors in any discharge any other adversary proceeding.			es, relief from stay act	tions or
	CER	<b>FIFICATION</b>			
	certify that the foregoing is a complete statement of any agreen nkruptcy proceeding.	nent or arrangement for page	yment to me for re	epresentation of the debto	r(s) in
Ja	nuary 1, 2020	/s/ Christina Pappou	ılis		
Da	nte	Christina Pappoulis Signature of Attorney			
		Gregory & Pappouli			
		5307 Limestone Rd. Suite 103			
		Wilmington, DE 198	08		
		302-421-9101 Fax:			
		ninapappoulis@bgp Name of law firm	negai.com		

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7	:	Liquidation	
\$2	45	filing fee	
\$	75	administrative fee	
+ \$	15	trustee surcharge	
\$3	35	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fil	I in this inform	ation to identify you	r case:			
De	ebtor 1	Theresa Lynn W	/illiams Middle Name	Last Name		
1	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ban	kruptcy Court for the:	DISTRICT OF DELAWA	RE		
1	nse number				_	Check if this is an amended filing
St	as complete ar	of Financial	ible. If two married people		cankruptcy equally responsible for sup	
		). Answer every que		this form. On the top of an	y additional pages, write yo	ui name and case
Pa	rt 1: Give De	etails About Your Ma	arital Status and Where You	u Lived Before		
1.	What is your	current marital statu	is?			
	<ul><li>☐ Married</li><li>■ Not marri</li></ul>	ied				
2.	During the las	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do n	ot include where you live now	ı.	
	Debtor 1 Price	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
<b>3.</b> sta					ity property state or territor ico, Texas, Washington and V	
	■ No □ Yes. Mak	e sure you fill out <i>Sci</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explain	the Sources of You	r Income			
4.	Fill in the total	amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		endar years?
	□ No ■ Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calendar anuary 1 to Dec	year: ember 31, 2019 )	■ Wages, commissions, bonuses, tips	\$42,302.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Del	btor 1	The	eresa I	₋ynn Williams	3		Cas	se number (if known)		
					Debtor 1			Debtor 2		
					Sources of incom Check all that appl	ly. (b	ross income efore deductions and clusions)	Sources of inco		Gross income (before deductions and exclusions)
				before that: per 31, 2018)	■ Wages, commis bonuses, tips	ssions,	\$52,470.00	☐ Wages, commonstant bonuses, tips	nissions,	
					Operating a bus	siness		☐ Operating a b	ousiness	
			ar year Deceml	: per 31, 2017 )	■ Wages, commis bonuses, tips	ssions,	\$51,084.00	☐ Wages, commonutes bonuses, tips	nissions,	
					☐ Operating a bus	siness		☐ Operating a b	ousiness	
	winnir	ngs. Í ach s No	f you ar ource a	e filing a joint ca	se and you have inco	ome that you re	dividends; money collectived together, list it it is not include income	only once under De	btor 1.	
					Debtor 1			Debtor 2		
					Sources of incom Describe below.	ea (b	ross income from ach source efore deductions and aclusions)	Sources of inco		Gross income (before deductions and exclusions)
Pai	rt 3:	List	Certair	Payments Yo	u Made Before You I	Filed for Bank	ruptcy			
6.	_	No.	Neither individual During No Yes	the 90 days beto. Go to line est to adjustment of the 90 days beto. Go to line est to adjustment of the 90 days beto. Go to line est to adjustment of the 90 days beto. Go to line est to below include particular of the 90 days beto.	a personal, family, or fore you filed for bank 7. each creditor to whore reditor. Do not include payments to an attoint on 4/01/22 and everyour filed for bank 7. each creditor to whore yments for domestic states.	ily consumer household pur ruptcy, did you m you paid a to e payments for rney for this bary 3 years after ily consumer ruptcy, did you m you paid a to support obligat	debts. Consumer deb rpose."  I pay any creditor a total otal of \$6,825* or more of domestic support obli- ankruptcy case.	al of \$6,825* or mor in one or more paying gations, such as chi or after the date of al of \$600 or more?	e? ments and the support and adjustment.	ne total amount you nd alimony. Also, do
		•••		,	or this bankruptcy cas					
	Cred	iitor's	Name	and Address	Dates of	of payment	Total amount paid	Amount you still owe	Was this p	payment for

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Case number (if known)

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partne more of their voting	rships of which yo securities; and ar	u are a gener ny managing a	al partner; corporations agent, including one for
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
В.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos		nents or transfer a	ny property on a	ccount of a d	ebt that benefited an
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name
Par	t 4: Identify Legal Actions, Repossession	s and Foreclosures				
	List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.  Case title Case number	cases, small claims actions  Nature of the case	, divorces, collection	n suits, paternity a	ctions, support	ŕ
10.	Within 1 year before you filed for bankruptor. Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address		rty repossessed, fo	preclosed, garnis	hed, attache	d, seized, or levied?  Value of the property
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becall No  ☐ Yes. Fill in the details.		uding a bank or fin	ancial institution	, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an No Yes	, , , , ,	rty in the possessi	on of an assigne	e for the ben	efit of creditors, a
	Within 2 years before you filed for bankrup	tcy, did you give anv gifts	with a total value	of more than \$60	0 per person	?
	■ No □ Yes. Fill in the details for each gift.	, <b>, 3 , 3</b>				
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

Debtor 1 Theresa Lynn Williams

Case number (if known)

14.	Within 2 years before you filed for banks	uptcy, d	lid you give any gifts or contribution	ns with a tota	I value of more than	\$600 to any charity?
	<ul><li>■ No</li><li>☐ Yes. Fill in the details for each gift or one</li></ul>	ontributi	on			
	Yes. Fill in the details for each gift or of Gifts or contributions to charities that		Describe what you contributed		Dates you	Value
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		bescribe what you contributed		contributed	value
Par		.,				
15.	Within 1 year before you filed for bankru or gambling?	iptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of the	ft, fire, other disaster
	■ No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and	Descri	be any insurance coverage for the l	oss	Date of your	Value of property
	how the loss occurred		the amount that insurance has paid. L		loss	lost
		insuran	ce claims on line 33 of Schedule A/B:	Property.		
Par	t 7: List Certain Payments or Transfer	s				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	preparir	ng a bankruptcy petition?			erty to anyone you
	□ No					
	Yes. Fill in the details.					
	Person Who Was Paid		Description and value of any prop	erty	Date payment	Amount of
	Address		transferred		or transfer was	payment
	Email or website address Person Who Made the Payment, if Not	⁄ou			made	
	Gregory & Pappoulis		Legal services costs and fees		various	\$1,600.00
	5307 Limestone Road		_			
	Suite 103					
	Wilmington, DE 19808					
	Accord Creditor Services, LLC		Credit Counseling		December	\$18.00
	P.O. Box 10001		_		2019	
	Newnan, GA 30271					
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors o	to make payments to your creditor		r transfer any prope	erty to anyone who
	■ No					
	Yes. Fill in the details.					
	Person Who Was Paid		Description and value of any prop	ertv	Date payment	Amount of
	Address		transferred		or transfer was	payment
					made	
18.	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No	u <b>r busin</b> s made a	ess or financial affairs? as security (such as the granting of a s			
	Yes. Fill in the details.					
	Person Who Received Transfer		Description and value of	Describe :	any property or	Date transfer was
	Address		property transferred	payments	received or debts	made
	Person's relationship to you			paid in ex	change	

Debtor 1 Theresa Lynn Williams

Debtor 1	Theresa	Lynn	Williams	s
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Case number (if known)

19.	Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No □ Yes. Fill in the details.		ny property to a	self-settle	d trust or similar device o	f which you are a
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfer was made
Par	List of Certain Financial Accounts, Instru	uments, Safe Depos	it Boxes, and St	orage Unit	s	
20.	Within 1 year before you filed for bankruptcy, yellow, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated No	other financial accou	ınts; certificates	of deposi		
	Name of Financial Institution and	ast 4 digits of ccount number	Type of accordinstrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	ar before you filed fo	r bankruptcy, a	ny safe de <sub>l</sub>	oosit box or other deposit	ory for securities,
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than you	r home within 1	year befor	re you filed for bankruptc	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?
	Identify Property You Hold or Control for Do you hold or control any property that some		lude any proper	ty you bor	rowed from are storing fo	or or hold in trust
20.	for someone.		, р. оро.	., ,		.,
	Yes. Fill in the details. Owner's Name	Where is the pro	norty?	Docaribo	the property	Value
	Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property	value
Par	Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	s apply:				
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su	air, land, soil, surfac	e water, ground			
	Site means any location, facility, or property as to own, operate, or utilize it, including disposa	•	environmental l	law, wheth	er you now own, operate,	or utilize it or used
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		as a hazardous	waste, ha	zardous substance, toxic	substance,

Official Form 107

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Debtor 1	Theresa	Lynn	Williams
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Case number (if known)

24.	Has	any governmental unit notified you that	you may be liable or potentially liable	un	der or in violation of an environm	ental law?
		No Yes. Fill in the details.				
		ne of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of	any release of hazardous material?			
		No Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice
26.	Hav	e you been a party in any judicial or adm	ninistrative proceeding under any envi	iron	mental law? Include settlements	and orders.
		No Yes. Fill in the details.				
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case
Par	t 11:	Give Details About Your Business or 0	Connections to Any Business			
27.	With	nin 4 years before you filed for bankrupte	cy, did you own a business or have ar	1у о	f the following connections to any	y business?
		lacksquare A sole proprietor or self-employed in	n a trade, profession, or other activity,	, eitl	her full-time or part-time	
		☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	ip (	LLP)	
		☐ A partner in a partnership				
		☐ An officer, director, or managing exe	ecutive of a corporation			
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation			
		No. None of the above applies. Go to P	Part 12.			
		Yes. Check all that apply above and fill	in the details below for each business	s.		
		siness Name	Describe the nature of the business		Employer Identification numbe	
		dress nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security  Dates business existed	number or IIIN.
28.		nin 2 years before you filed for bankrupto itutions, creditors, or other parties.	cy, did you give a financial statement	to a	nyone about your business? Incl	ude all financial
		No				
		Yes. Fill in the details below.				
		me dress nber, Street, City, State and ZIP Code)	Date Issued			

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Theresa Lynn Williams	Case number (if known)
Part 12: Sign Below	
	ial Affairs and any attachments, and I declare under penalty of perjury that the answers e statement, concealing property, or obtaining money or property by fraud in connection 0,000, or imprisonment for up to 20 years, or both.
/s/ Theresa Lynn Williams	
Theresa Lynn Williams Signature of Debtor 1	Signature of Debtor 2
Date January 1, 2020	Date
Did you attach additional pages to Your Statement of No ☐ Yes	of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay someone who is not an ■ No	attorney to help you fill out bankruptcy forms?
☐ Yes. Name of Person Attach the <i>Bankruptcy</i>	Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this infor	mation to identify your	case:		
Debtor 1	Theresa Lynn Wil	liams		
Dobtor 2	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF DE	LAWARE	
Case number				Charl White is a
(if known)				Check if this is an amended filing
Official Fo		n fan Indi:	iduala Filipa IIndon Chant	a 7
Statemer	nt of intentio	n tor indiv	viduals Filing Under Chapto	<b>er /</b> 12/15
	ividual filing under chap	-	ll out this form if:	
	e claims secured by yo		at asserted	
You must file thi	ever is earlier, unless th	ithin 30 days after	ot expired.  you file your bankruptcy petition or by the date so the time for cause. You must also send copies to the	
	eople are filing together	in a joint case, bo	oth are equally responsible for supplying correct i	nformation. Both debtors must
	and accurate as possib our name and case nun		s needed, attach a separate sheet to this form. On	the top of any additional pages,
Part 1: List Yo	our Creditors Who Have	Secured Claims		
		art 1 of Schedule D	): Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
information be Identify the cre	elow. editor and the property tl	nat is collateral	What do you intend to do with the property tha secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's	Del-one Federal Cu		По 1 4	П.,
name:	bei-one rederal Cu		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of	2014 Nissan Pathfi	ndor 69000	Retain the property and enter into a	■ Yes
Description of property	miles	nder 68000	Reaffirmation Agreement.  ☐ Retain the property and [explain]:	
securing debt:	:		Retain the property and [explain].	
			_	_
Creditor's <b>F</b> name:	lagstar Bank		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
			☐ Retain the property and redeem it.	■ Yes
Description of property	153 Boggs Run Do 19904 Kent Count		Reaffirmation Agreement.	
securing debt:		,	■ Retain the property and [explain]: Retain and make payments	_
Creditor's S	Svo Portfolio Services	s	■ Surrender the property.	■ No
name:			Retain the property and redeem it.	<b>—</b> NO
Description of	Vistana Timeshare	Orlando FL	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property			☐ Retain the property and [explain]:	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Theresa Lynn Williams	Case number (if known)
securing debt:	
Part 2: List Your Unexpired Personal Property Leases  For any unexpired personal property lease that you listed in Schedule G: Executo in the information below. Do not list real estate leases. Unexpired leases are lease You may assume an unexpired personal property lease if the trustee does not ass	es that are still in effect; the lease period has not yet ended.
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes

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	Theresa Lynn Williams	Case number (if known)
Part 3	Sign Below	
	penalty of perjury, I declare that I have indicat rty that is subject to an unexpired lease.	ed my intention about any property of my estate that secures a debt and any personal
prope		ed my intention about any property of my estate that secures a debt and any personal  X
prope	rty that is subject to an unexpired lease.	
prope	rty that is subject to an unexpired lease.	X

		Cas	e 20-10001-	BLS	DOC 1	Filed 01/01/20	Page 23	0157		
Fill	in this inform	nation to identify	your case and th	is filing	:					
Deb	otor 1	Theresa Lyn	n Williams							
Dok	otor 2	First Name	Middle	Name		Last Name				
	use, if filing)	First Name	Middle	Name		Last Name				
Uni	ted States Bar	nkruptcy Court for	the: DISTRICT	OF DEL	AWARE					
Cas	e number _					_				Check if this is an amended filing
Sc	hedul	rm 106A/E <b>e A/B: P</b> i	roperty			an asset fits in more than on				12/15
Pari	mation. If more ver every quest	space is needed, ion.  Each Residence, B  ave any legal or eq	attach a separate sh uilding, Land, or Oth	neet to th	is form. On th	e are filing together, both and the top of any additional page wn or Have an Interest In , land, or similar property?				
1.1	153 Boggs		cription	What	Single-family  Duplex or mu	<b>y?</b> Check all that apply home Iti-unit building n or cooperative	the amoun	t of any secure	d claim	exemptions. Put as on Schedule D: cured by Property.
	<b>Dover</b> City	<b>DE</b> State	19904-0000 ZIP Code		Manufactured Land Investment pr	or mobile home	Current va entire pro			rent value of the ion you own?
				□ □ Who h	Timeshare Other nas an interes Debtor 1 only	t in the property? Check one	(such as f			vnership interest by the entireties, or
	County				Debtor 2 only Debtor 1 and At least one of	Debtor 2 only  of the debtors and another  ou wish to add about this ite	(see in	k if this is com structions) ocal	munit	y property

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Debt	or 1 _	Theresa Lynn Williams	Case	number (if known)	
	If you	own or have more than one, li			
1.2		a Timeshare Orlando FL Iress, if available, or other description	What is the property? Check all that apply  Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.	
	City	State ZIP Code	Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item	□ Check if this is com (see instructions)	ancy by the entireties, or
some	ou own, one else		interest in any vehicles, whether they are registere report it on Schedule G: Executory Contracts and Une		chicles you own that
	No Yes				
3.1	Make: Model: Year: Approx	Nissan Pathfinder 2014  kimate mileage: 68000	Who has an interest in the property? Check one  ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
	Other is	nformation:	☐ At least one of the debtors and another ☐ Check if this is community property	\$22,000.00	\$22,000.00
3.2		2007 kimate mileage: 125000	Who has an interest in the property? Check one  ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?	d claims on Schedule D:
	Other in	nformation:	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$3,000.00	\$3,000.00

Deb	tor 1 Theresa Ly	nn Williams Case number (ii	known)
		otor homes, ATVs and other recreational vehicles, other vehicles, and accessories, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	s
	No Yes		
		f the portion you own for all of your entries from Part 2, including any entries for ned for Part 2. Write that number here	
Part	3: Describe Your Pers	onal and Household Items	
·	·	legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	ousehold goods and Examples: Major applia No  Yes. Describe	furnishings nces, furniture, linens, china, kitchenware	
	- 100. Decombe		
		Used household goods and furnishings	\$3,000.00
E	,	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; ll phones, cameras, media players, games	music collections; electronic devices
		Electronics	\$200.00
	other collect No Yes. Describe	d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stan ions, memorabilia, collectibles	np, coin, or baseball card collections;
E	quipment for sports a Examples: Sports, photo musical insti No	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis;	canoes and kayaks; carpentry tools;
	Yes. Describe		
	Firearms  Examples: Pistols, rifle  No  Yes. Describe	es, shotguns, ammunition, and related equipment	
	Clothes  Examples: Everyday c  No Yes. Describe	lothes, furs, leather coats, designer wear, shoes, accessories	
	- 100. D00011DE		
		Used clothing	\$300.00
	Jewelry Examples: Everyday je I No I Yes. Describe	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches,	gems, gold, silver
		Jewelry	\$200.00

Official Form 106A/B

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D	ebtor 1	Theresa Lynr	n Williams		Case number (if known)	
13		rm animals				
	Examp  ■ No	oles: Dogs, cats, b	irds, horses			
	_	Describe				
14	. Any oth	her personal and	I household items yo	u did not already list, inc	cluding any health aids you did not list	
	■ No	01				
	⊔ Yes.	Give specific info	rmation			
15				rom Part 3, including an	y entries for pages you have attached	\$3,700.00
Pa	art 4: Des	scribe Your Financi	ial Assets			
				est in any of the followir	ng?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	■ No			our home, in a safe depos	sit box, and on hand when you file your petit	ion
17				al accounts; certificates of counts with the same instit	deposit; shares in credit unions, brokerage tution, list each.	houses, and other similar
	_			Institution na	me:	
						•
_			17.1. Checking	Dover FCU		\$850.00
					-	
			17.2. <b>Savings</b>	Dover FCU		\$60.00
18			or publicly traded stoo	cks ith brokerage firms, mone	ey market accounts	
	■ No				,	
	☐ Yes		Institution or is	ssuer name:		
19	Non-pu joint ve No	•	ock and interests in ir	ncorporated and unincor	porated businesses, including an intere	st in an LLC, partnership, and
		Give specific info	rmation about them Name of entity:		% of ownership:	
20	Negotia	able instruments i	nclude personal check		gotiable instruments issory notes, and money orders. y signing or delivering them.	
	■ No		•		,	
	☐ Yes. (	Give specific infor	mation about them Issuer name:			
21		nent or pension a bles: Interests in IF		1(k), 403(b), thrift savings	accounts, or other pension or profit-sharing	plans
	Yes. I	List each account	separately. Type of account:	Institution na	me:	
			401(k)	401k John	s Hancock	\$620.00

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De	ebtor 1 <b>T</b>	heresa Lynn Williams		Case number (if known)	
	_	•			
22.	Your share	eposits and prepayments e of all unused deposits you have made so : Agreements with landlords, prepaid rent,			or others
	Yes		Institution name or individual:		
23.	Annuities ■ No	(A contract for a periodic payment of mone	ey to you, either for life or for a numb	er of years)	
	☐ Yes	Issuer name and description.			
24.	Interests in 26 U.S.C. §	n an education IRA, in an account in a q § 530(b)(1), 529A(b), and 529(b)(1).	ualified ABLE program, or under a	ı qualified state tuition prograı	m.
	☐ Yes	Institution name and descriptio	n. Separately file the records of any i	nterests.11 U.S.C. § 521(c):	
25.	Trusts, eq ■ No	uitable or future interests in property (c	other than anything listed in line 1)	, and rights or powers exercis	able for your benefit
	☐ Yes. Giv	ve specific information about them			
26.		opyrights, trademarks, trade secrets, au : Internet domain names, websites, procee		ements	
	_	ve specific information about them			
	Examples.  No	franchises, and other general intangible: Building permits, exclusive licenses, coop		icenses, professional licenses	
	☐ Yes. Giv	ve specific information about them			
M	oney or pro	perty owed to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	_	ds owed to you			
	■ No □ Yes. Giv	e specific information about them, includin	ig whether you already filed the return	ns and the tax years	
	■ No	pport : Past due or lump sum alimony, spousal s e specific information	support, child support, maintenance, o	divorce settlement, property sett	lement
	Examples.  No	ounts someone owes you  : Unpaid wages, disability insurance paym benefits; unpaid loans you made to some		cation pay, workers' compensati	on, Social Security
		ve specific information  n insurance policies			
01.		: Health, disability, or life insurance; health	savings account (HSA); credit, home	eowner's, or renter's insurance	
		ne the insurance company of each policy a Company name:		eficiary:	Surrender or refund value:
32.		est in property that is due you from som the beneficiary of a living trust, expect pro- has died.		are currently entitled to receive	property because
	☐ Yes. Giv	ve specific information			

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Deb	tor 1 Theresa Lynn Williams		Case number (if known)	
_	Claims against third parties, whether or not you have filed a la Examples: Accidents, employment disputes, insurance claims, or		and for payment	
	No Yes. Describe each claim			
	Other contingent and unliquidated claims of every nature, incl No	luding counterclaims o	of the debtor and rights to se	et off claims
	Yes. Describe each claim			
	Any financial assets you did not already list I <sub>No</sub>			
	Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, includi for Part 4. Write that number here			\$1,530.00
Part	5: Describe Any Business-Related Property You Own or Have an Inte	erest In. List any real esta	te in Part 1.	
37. <b>D</b>	o you own or have any legal or equitable interest in any business-rela	nted property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property Yo If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	t In.	
	Oo you own or have any legal or equitable interest in any farm	n- or commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
_	Do you have other property of any kind you did not already lis Examples: Season tickets, country club membership No	t?		
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write the	hat number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$245,000.00
56.	Part 2: Total vehicles, line 5	\$25,000.00		
57.	Part 3: Total personal and household items, line 15	\$3,700.00		
58.	Part 4: Total financial assets, line 36	\$1,530.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$30,230.00	Copy personal property total	\$30,230.00
63	Total of all property on Schedule A/B Add line 55 + line 62			\$275,230,00

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Fill in this infor	mation to identify your	case:					
Debtor 1	Theresa Lynn Wi	lliams					
	First Name	Middle Name		Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name			
United States Ba	ankruptcy Court for the:	DISTRICT OF DE	LAWARE				
Case number							
(if known)						☐ Check if this is an amended filing	
Official Fo	rm 106C						
			01 - !	<b>-</b>			
Schedui	e C: The Pro	operty yo	u Clai	m as Exemp	)T		4/19
the property you I	isted on <i>Schedule A/B: F</i> nd attach to this page as	Property (Official For	m 106A/B) a	s your source, list the prop	perty that you c	supplying correct information. laim as exempt. If more space dditional pages, write your na	e is
specific dollar ar any applicable s funds—may be u exemption to a p	mount as exempt. Alter tatutory limit. Some ex unlimited in dollar amo	natively, you may o emptions—such as unt. However, if you	claim the ful those for h u claim an e	I fair market value of the ealth aids, rights to reco xemption of 100% of fai	property being eive certain be market value	ne way of doing so is to sta g exempted up to the amou nefits, and tax-exempt retire under a law that limits the your exemption would be li	int of ement
Part 1: Identi	fy the Property You Cla	aim as Exempt					
1. Which set o	f exemptions are you c	laiming? Check one	e only, even	if your spouse is filing with	you.		
■ You are cl	laiming state and federal	nonbankruptcy exer	mptions. 11	U.S.C. § 522(b)(3)			
□ Vou are cl	laiming federal exemptio	ne 11 II S C & 523	2(h)(2)				

☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	and the same of th		Specific laws that allow exemption	
Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
\$240,000.00		\$63,716.00	10 Del. C. § 4914(c)(1)	
		100% of fair market value, up to any applicable statutory limit		
\$5,000.00		\$0.00	10 Del. C. § 4914(b)	
		100% of fair market value, up to any applicable statutory limit		
\$22,000.00		\$0.00	10 Del. C. §4914(c)(2)	
		100% of fair market value, up to any applicable statutory limit		
\$3,000.00		\$3,000.00	10 Del. C. §4914(c)(2)	
		100% of fair market value, up to any applicable statutory limit		
\$3,000.00		\$3,000.00	10 Del. C. § 4914(b)	
		100% of fair market value, up to		
	\$240,000.00 \$5,000.00 \$222,000.00 \$3,000.00	\$240,000.00	Check only one box for each exemption.  \$240,000.00  \$3,716.00  \$100% of fair market value, up to any applicable statutory limit  \$22,000.00  \$100% of fair market value, up to any applicable statutory limit  \$22,000.00  \$100% of fair market value, up to any applicable statutory limit  \$22,000.00  \$100% of fair market value, up to any applicable statutory limit  \$3,000.00  \$3,000.00  \$3,000.00  \$3,000.00	

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Debtor	1 Ineresa Lynn Williams			Case number (if known)		
Bri Sc.	ef description of the property and line on hedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	ectronics ae from Schedule A/B: <b>7.1</b>	\$200.00		\$200.00	10 Del. C. § 4914(b)	
LII	ie iioni Genedale A.B. III			100% of fair market value, up to any applicable statutory limit		
	sed clothing the from Schedule A/B: 11.1	\$300.00		\$300.00	10 Del.C. § 4902(a)	
LII	ie iioni Genedale 74 B. TT.T			100% of fair market value, up to any applicable statutory limit		
	welry te from Schedule A/B: 12.1	\$200.00		\$200.00	10 Del. C. § 4914(b)	
LIII	le Hotti Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit		
	necking: Dover FCU	\$850.00		\$850.00	10 Del. C. § 4914(b)	
LII	ie ii oni Genedale 74 B. TTT			100% of fair market value, up to any applicable statutory limit		
	ivings: Dover FCU	\$60.00		\$60.00	10 Del. C. § 4914(b)	
Lii	io nom concedio / v Z. TT-Z			100% of fair market value, up to any applicable statutory limit		
	1(k): 401k Johns Hancock	\$620.00		\$620.00	10 Del. C. § 4914(b)	
	ie iioni Genedale A.B. 2111			100% of fair market value, up to any applicable statutory limit		
	e you claiming a homestead exemption ubject to adjustment on 4/01/22 and every			led on or after the date of adjustmer	nt.)	
_	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

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Fill in this information to identify	vour case.		-		
-					
Debtor 1 Theresa Lynn First Name		Last Name		-	
Debtor 2 (Spouse if, filling) First Name	Middle Name	Last Name			
(Spouse II, IIIIng) First Name	ivildale Name	Last Name			
United States Bankruptcy Court for t	the: DISTRICT OF DELAWARE				
Case number					
(if known)					if this is an
				ameno	ded filing
Official Form 106D					
	rs Who Have Claims S	acurad	l hy Propert	V	12/15
Schedule D. Credito	13 Wild Have Claims 3	<del>ecui eu</del>	i by Fropert	<u>y</u>	12/13
	ole. If two married people are filing together, I it out, number the entries, and attach it to				
1. Do any creditors have claims secure	d by your property?				
$\square$ No. Check this box and subm	nit this form to the court with your other so	chedules. Yo	u have nothing else t	to report on this form.	
Yes. Fill in all of the informati	on below.				
Part 1: List All Secured Claims					
	as more than one secured claim, list the credit	or separately	Column A	Column B	Column C
for each claim. If more than one creditor	has a particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alpha	betical order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Del-one Federal Cu	Describe the property that secures the		\$24,874.00	\$22,000.00	\$2,874.00
Creditor's Name	2014 Nissan Pathfinder 68000	miles			
Attn: Bankruptcy					
270 Beiser Blvd	As of the date you file, the claim is: Ch	eck all that			
Dover, DE 19904	apply.  Contingent				
Number, Street, City, State & Zip Code	Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mo	rtgage or secu	ured		
☐ Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
☐ At least one of the debtors and another	3				
Check if this claim relates to a	Other (including a right to offset)				
community debt					
Date debt was incurred	Last 4 digits of account numbe	r <u>0101</u>			
2.2 Flagstar Bank	Describe the property that secures the	e claim:	\$176,284.00	\$240,000.00	\$0.00
Creditor's Name	153 Boggs Run Dover, DE 199	04	· ,		·
	Kent County				
Attn: Bankruptcy	As of the date you file, the claim is: Ch	eck all that			
5151 Corporate Drive	apply.				
Troy, MI 48098	_ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as mo	ortgage or secu	ured		
Debtor 2 only	car loan)				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
☐ At least one of the debtors and another		· · ·· <del>··</del> ··/			
☐ Check if this claim relates to a	☐ Other (including a right to offset)				
community debt	<u> </u>				<del></del>
Date debt was incurred	Last 4 digits of account numbe	r <b>2800</b>			

Official Form 106D

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Debtor 1					Case number (if known)				
	First Name N	Middle Name	Last Name						
2.3 <b>Sv</b>	o Portfolio Services	Describe the pr	operty that secures the claim:	\$5,0	096.00	\$5,000.00	\$96.00		
Cred	itor's Name	Vistana Time	eshare Orlando FL						
	n: Loan Servicing ministration								
900	Ministration 02 San March Court ando, FL 32819	As of the date y apply.  ☐ Contingent	rou file, the claim is: Check all that	_					
Numl	ber, Street, City, State & Zip Co								
Who owe	s the debt? Check one.	☐ Disputed <b>Nature of lien.</b>	Check all that apply.						
■ Debtor	•	An agreemer car loan)	nt you made (such as mortgage or	secured					
	1 and Debtor 2 only	☐ Statutory lien	(such as tax lien, mechanic's lien	)					
☐ At least	t one of the debtors and an	nother	n from a lawsuit						
	if this claim relates to a nunity debt	Other (includ	ing a right to offset)						
Date debt	was incurred	Last 4 di	gits of account number 925	8	-				
Add the	dollar value of your entri	es in Column A on this p	page. Write that number here:		\$206,254.00				
	the last page of your for at number here:	m, add the dollar value to	otals from all pages.		\$206,254.00				

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	Ousc 20	10001 BLO	7001 1110001	101/20 1 age 00 0	1 0 /
Fill in this i	nformation to identify your	case:			
Debtor 1	Theresa Lynn Wil	liams			
200101 1	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	) First Name	Middle Name	Last Name		
	es Bankruptcy Court for the:	DISTRICT OF DELAY	WARE		
	, ,				
Case number	er				☐ Check if this is an amended filing
Schedul	Form 106E/F le E/F: Creditors W			Park 2 for graditors with NONDRA	12/15
any executory Schedule G: E Schedule D: C left. Attach the name and cas	ontracts or unexpired leases Executory Contracts and Unexp Creditors Who Have Claims Sec	that could result in a clai ired Leases (Official Forn ured by Property. If more e. If you have no informa	im. Also list executory on 106G). Do not include space is needed, copy	ontracts on Schedule A/B: Pro any creditors with partially sec the Part you need, fill it out, nur	RIORITY claims. List the other party to perty (Official Form 106A/B) and on ured claims that are listed in mber the entries in the boxes on the of any additional pages, write your
1. Do any c	reditors have priority unsecure	d claims against you?			
■ No. G	o to Part 2.				
☐ Yes.					
Part 2: L	ist All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any c	reditors have nonpriority unsec	ured claims against you'	?		
☐ No. Y	ou have nothing to report in this p	art. Submit this form to the	court with your other sche	edules.	
Yes.					
unsecure		for each claim. For each o	claim listed, identify what t	ype of claim it is. Do not list claim	nas more than one nonpriority is already included in Part 1. If more ins fill out the Continuation Page of
					Total claim
4.1 <b>Am</b>	-	Last 4 dig	gits of account number	2143	\$11,801.00
Coi Po	priority Creditor's Name rrespondence/Bankruptc Box 981540	y When wa	s the debt incurred?		
	Paso, TX 79998 ber Street City State Zip Code	As of the	date you file, the claim i	s: Chock all that apply	
	incurred the debt? Check one.	AS OF THE	date you me, me claim	S. Oneck all that apply	
_	Debtor 1 only	☐ Contin	aont		
	Debtor 2 only	☐ Unliqui	-		
	-				
	Debtor 1 and Debtor 2 only	☐ Disput	ea IONPRIORITY unsecurea	ł claim:	
= '				. Oldiiii	
debt	Check if this claim is for a comr t e claim subject to offset?	□ Obliga		ration agreement or divorce that y	you did not
	-		·	g plans, and other similar debts	
□ Y		Other	Specify Credit Card	I	
		C.1101.	-1		

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Debt	I neresa Lynn Williams	Case number (if known)	
4.2	Amex	Last 4 digits of account number 2223	\$3,034.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
		_ '	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.3	Amex/Bankruptcy	Last 4 digits of account number 8863	\$4,419.00
	Nonpriority Creditor's Name Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	☐ Yes	■ Other. Specify Credit Card	
4.4	Bank of America	Last 4 digits of account number 0346	\$7,881.00
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50	When was the debt incurred?	
	Tampa, FL 33634		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	⊔ Yes	■ Other. Specify Credit Card	

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Debtor	1 Theresa Lynn Williams	Case number (if known)	
4.5	Barclays Bank Delaware	Last 4 digits of account number 4640	\$2,026.00
	Nonpriority Creditor's Name Attn: Correspondence Po Box 8801 Wilmington, DE 19899	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Credit Card	
4.6	Bayhealth Medical Center  Nonpriority Creditor's Name	Last 4 digits of account number	\$16,000.00
	21 West Clarke Avenue P.O. Box 199	When was the debt incurred? March 2019	
	Milford, DE 19963-0199		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.7	Bmw Bank Of North Amer Nonpriority Creditor's Name	Last 4 digits of account number 4704	\$2,455.00
	Attn: Bankruptcy Po Box 3608	When was the debt incurred?	
	Dublin, OH 43016		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes		
	⊔ Yes	■ Other. Specify Credit Card	

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Debt	or 1 Theresa Lynn Williams	Case number (if known)	
4.8	Chase Card Services	Last 4 digits of account number 4027	\$3,680.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298	When was the debt incurred?	
	Wilmington, DE 19850  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date year me, the claim is. Officer all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
4.9	Dedicated to Women	Last 4 digits of account number 3597	\$210.00
	Nonpriority Creditor's Name 200 Banning St., Suite 320 Dover, DE 19904	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	
4.1 0	Deptartment Store National Bank/Macy's	Last 4 digits of account number 4010	\$1,328.00
	Nonpriority Creditor's Name Attn: Bankruptcy 9111 Duke Boulevard	When was the debt incurred?	
	Mason, OH 45040		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Charge Account	
		- diant apparty	

# 

Debtor	1 Theresa Lynn Williams	Case number (if known)					
4.1		400.4	<b>45</b> 45 40				
1	Discover Financial	Last 4 digits of account number 1884	\$5,250.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Department Po Box 15316	When was the debt incurred?					
	Wilmington, DE 19850  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Credit Card					
4.1	First State Orthopaedics	Last 4 digits of account number 8743	\$139.24				
2	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ103.24				
	4745 Ogletown Stanton Rd. Suite 225	When was the debt incurred?					
	Newark, DE 19713	-					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify Medical					
4.1	Kent Diagnostic Radiology Assoc	Last 4 digits of account number 0603	\$871.00				
<u>J</u>	Nonpriority Creditor's Name		<u> </u>				
	PO Box 3798 Peoria, IL 61612-3798	When was the debt incurred?					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify medical services					

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Debtor	Theresa Lynn Williams	Case number (if known)					
4.1	Kohls/Capital One	Last 4 digits of account number 7587	\$1.632.00				
4	Nonpriority Creditor's Name Attn: Credit Administrator	Last 4 digits of account number /58/ When was the debt incurred?	<b>Φ1,032.00</b>				
	Po Box 3043 Milwaukee, WI 53201 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Charge Account					
4.1 5	Midland Fund	Last 4 digits of account number 3241	\$5,675.00				
	Nonpriority Creditor's Name Attn: Bankruptcy 350 Camino De La Reine Ste 100 San Diego, CA 92108	When was the debt incurred?					
	Number Street City State Zip Code  Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	□ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Bank					
4.1	Parker Run BC Communities	Last 4 digits of account number	\$3,852.51				
	Nonpriority Creditor's Name 4905 Mermaid Blvd Wilmington, DE 19808	When was the debt incurred?					
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	$\square$ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify dues					

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Debtor	1 Theresa Lynn Williams	Case number (if known)					
4.1	Paths Representative	Last 4 digits of account number 0603	\$1.953.00				
<i>T</i>	Nonpriority Creditor's Name 1352 Marrows Road Suite 110	When was the debt incurred?	<b>V</b> 1,000.00				
	Newark, DE 19711  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Collections Bay Health					
4.1	Piney Grove Properties	Last 4 digits of account number 1341	\$1,998.93				
	Nonpriority Creditor's Name c/o Law Office of Patrick Scanlon 203 NE Front Street Suite 101	When was the debt incurred?					
	Milford, DE 19963  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	The of the date year me, the stanner. Onesk an that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Collections					
4.1 9	State Collection Service	Last 4 digits of account number 6226	\$1,163.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 6250	When was the debt incurred?					
	Madison, WI 53716  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	□ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	■ No □ Yes	Other. Specify  Collection Attorney Bayhealth Emergency					
	<b>□</b> 162	Other. Specify     Confection Attorney Bayneaun Emergency					

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Debtor	1 Theresa Lynn Williams	Case number (if known)	
4.2			
0	State Collection Service	Last 4 digits of account number 6407	\$790.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	Attn: Bankruptcy Po Box 6250	Then was the dest mounted.	
	Madison, WI 53716		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No -	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Bayhealth Emergency	
4.2	Sun Wise Family Dermatology	Last 4 digits of account number 8329	\$205.74
1	Nonpriority Creditor's Name	Last 4 digits of account number 8329	Ψ203.74
	111 W Main Street	When was the debt incurred?	
	Suite 201		
	Middletown, DE 19709  Number Street City State Zip Code	As of the date you file the claim is Cheek all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	_	-	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical	
		— Gillel. Opeciny	
4.2 2	Synchrony Bank/Care Credit	Last 4 digits of account number 7072	\$8,453.00
	Nonpriority Creditor's Name		
	Attn: Bankruptcy Dept Po Box 965060	When was the debt incurred?	
	Orlando, FL 32896		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Charge Account	

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Debtor	1 Theresa I	₋ynn Williams		Case r	number (if known)		
4.2	USDOE/GLI	-	Last 4 digits of account number	858′	1		\$81,844.00
	Nonpriority Cred Attn: Bankr	uptcy	When was the debt incurred?				
	Po Box 786 Madison, W Number Street		As of the date you file, the claim	is: Ched	ck all that apply		
	Who incurred t	the debt? Check one.	_				
	Debtor 1 on	ly	Contingent				
	Debtor 2 onl	ly	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	Disputed		_		
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:	•		
		s claim is for a community	Student loans				
	debt Is the claim su	bject to offset?	Obligations arising out of a separeport as priority claims			·	
	No		Debts to pension or profit-sharing	ng plans	, and other similar	debts	
	☐ Yes		Other. Specify				
			Educationa	al			
4.2	USDOE/GLI	-	Last 4 digits of account number	858	1	_	\$2,664.00
	Nonpriority Cred		When was the debt incurred?				
	Po Box 786		When was the dest mountain	-			
	Madison, W						
		City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Ched	ck all that apply		
	_		☐ Contingent				
	Debtor 1 onl	•	☐ Unliquidated				
	Debtor 2 onl	•	☐ Disputed				
	☐ Debtor 1 and	•	Type of NONPRIORITY unsecure	d claim:	<b>:</b>		
		of the debtors and another	Student loans				
	debt	s claim is for a community bject to offset?	☐ Obligations arising out of a separeport as priority claims	aration a	greement or divor	ce that you did not	
	■ No	<b>-</b>	Debts to pension or profit-sharir	ng plans	and other similar	debts	
	□ Yes		Other. Specify	31	,		
	<b>—</b> 165		Educationa	al			
Dort 2	List Other	s to Be Notified About a Debt		41			
is tryir have r notifie	is page only if y ng to collect fro nore than one c d for any debts	you have others to be notified abo im you for a debt you owe to some creditor for any of the debts that yo in Parts 1 or 2, do not fill out or s	ut your bankruptcy, for a debt that yone else, list the original creditor in ou listed in Parts 1 or 2, list the addiubmit this page.	Parts 1	1 or 2, then list th	e collection agency	here. Similarly, if you
Part 4:		mounts for Each Type of Unse					
	the amounts of f unsecured cla		. This information is for statistical r	eportin	g purposes only.	28 U.S.C. §159. Add	the amounts for each
	Co	Demostic compart chlimaticus		Co		al Claim	
Total claims	6a.	Domestic support obligations		6a.	\$	0.00	
from Pa		Taxes and certain other debts ye	=	6b.	\$	0.00	
	6c.	Claims for death or personal inju		6c.	\$	0.00	
	6d.	onier. Add all other priority unsect	ured claims. Write that amount here.	6d.	<b>\$</b>	0.00	
	6e.	Total Priority. Add lines 6a throug	h 6d.	6e.	\$	0.00	
					-	al Claim	
Total	6f.	Student loans		6f.	\$	84,508.00	
claims	r+ 2 6~	Obligations arising out of a con-	eration agreement or diverse that	60	¢		

Official Form 106 E/F

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Debtor 1	Theresa L	ynn Williams	Case nu	ımber (if known)		
		you did not report as priority claims			0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. 6i.	\$	0.00	
	6i.	<ul> <li>Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ul>		\$	84,817.42	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	169,325.42	

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Fill in this infor	mation to identify your	case:		
Debtor 1	Theresa Lynn Wi	lliams		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF DELAWA	ARE .	
Case number				
(if known)				

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					<u> </u>
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Olato	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.4	Oity		Olate	Zii Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					<u> </u>
	Name				
	Number	Street			
	City		State	ZIP Code	_

### Case 20-10001-BLS Doc 1 Filed 01/01/20 Page 44 of 57

Fill in this	information to identify you	ır case:			
Debtor 1	Theresa Lynn V	Villiams			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the	: DISTRICT OF DELAWA	ARE		
Case numb	per				
(if known)					☐ Check if this is an amended filing
Official	Form 10011				
	Form 106H	d a la 4 a v a			
Schea	ule H: Your Co	deptors			12/15
	`	n). Answer every question If you are filing a joint case, of		e as a codebtor.	
■ No □ Yes					
		ou lived in a community pr na, Nevada, New Mexico, Pu			ty states and territories include
_		,	,		,
	Go to line 3.  Did your spouse, former so	oouse, or legal equivalent live	with you at the time?		
<b>—</b> 100.	. Dia your opouse, former sp	ouse, or logal equivalent live	with you at the time.		
in line Form 1	2 again as a codebtor only	y if that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor lame, Number, Street, City, State and	I ZIP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D. lir	ne
	Name			☐ Schedule E/F,	· ———
				☐ Schedule G, lir	
	Number Street City	State	ZIP Code		
	Эц	Ciale	Zii Gode		
3.2				☐ Schedule D, lir	ne
	Name			□ Schedule E/F,	line
				☐ Schedule G, lir	ne
	Number Street City	State	ZIP Code	<del></del>	
	···,	Olulo	Z. 0000		

Fill	in this information to identify your ca	ase:								
Del	btor 1 Theresa Lyr	nn Williams			_					
	btor 2 buse, if filing)									
Uni	ited States Bankruptcy Court for the	: DISTRICT OF DELAV	VARE		_					
	se number nown)		-					ed filing ent showing	g postpetition	
0	fficial Form 106I					Ī	/IM / DD/ \	/YYY		
S	chedule I: Your Inc	ome								12/1
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing wi	ng jointly, and your ith you, do not inclu	spouse i de inforr	s liv nati	ing with on abou	you, incl t your spe	ude inform ouse. If mo	nation about ore space is	your needed,
	<u> </u>									
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fil	ing spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed			☐ Not e	mployed		
	employers.	Occupation	Office Manager							
	Include part-time, seasonal, or self-employed work.	Employer's name	Premier Physic	al Thera	ру					
	Occupation may include student or homemaker, if it applies.	Employer's address	1050 Industrial Middletown, DE							
		How long employed to	here? 1 year				_			
Pai	rt 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write	e \$0 in the	space. Inc	lude your no	n-filing
,	ou or your non-filing spouse have mo e space, attach a separate sheet to	. , ,	ombine the informatio	n for all e	mpl	oyers for	that perso	on on the lir	nes below. If	you need
						For De	btor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3	,937.51	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	- •
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	3,9	37.51	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

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Debt	tor 1	Theresa Lynn Williams	_	C	ase number (if kn	own)				
					For Debtor 1		For	Debtor 2	or	
								n-filing sp		
	Сор	y line 4 here	4.	_	\$ 3,937	.51	\$		N/A	-
5.	l ist	all payroll deductions:								
Э.		• •	F.o.		\$ 835	40	æ		NI/A	
	5a. 5b.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans	5a. 5b.			.00	\$_ \$		N/A N/A	_
	5c.	Voluntary contributions for retirement plans	5c.		:	.00	\$ _		N/A	=
	5d.	Required repayments of retirement fund loans	5d.			.00	\$_		N/A	-
	5e.	Insurance	5e.		\$ 131		\$_		N/A	_
	5f.	Domestic support obligations	5f.		. —	.00	\$		N/A	_
	5g.	Union dues	5g.		\$ 0	.00	\$		N/A	-
	5h.	Other deductions. Specify: 401k contribution	5h.	.+	\$ 175	.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$1,141	.42	\$		N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	;	\$2,796	.09	\$		N/A	_
8.		all other income regularly received:								
	8a.	Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.			.00	\$_		N/A	_
	8b.	Interest and dividends	8b.	•	\$0	.00	\$		N/A	=
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce								
		settlement, and property settlement.	8c.		\$0	.00	\$		N/A	_
	8d.	Unemployment compensation	8d.			.00	\$		N/A	_
	8e.	Social Security	8e.		\$0	.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive								
		Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	;							
		Nutrition Assistance Program) or housing subsidies.								
		Specify:	_ 8f.			.00	\$		N/A	_
	8g.	Pension or retirement income	8g			.00	\$_		N/A	=
	8h.	Other monthly income. Specify:	8h	.+	\$0	.00	+ \$_		N/A	-
9.	hhΑ	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		.00	\$		N/A	Δ
٥.	, , , ,	an culting modern rad into cares recorded to refregren.	٥.	Ľ		.00	L		14/7	
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$	2,796.09	+ \$	-	N/A :	= \$	2,796.09
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_	2,7 90.09	Τ Ψ-		17/4	-  Ψ —	2,7 90.09
11		e all other regular contributions to the expenses that you list in Schedule	, -			Ь				
11.		de contributions from an unmarried partner, members of your household, your		ende	ents. vour room	mate	s. and			
		r friends or relatives.			,,,		.,			
	_	not include any amounts already included in lines 2-10 or amounts that are not	availa	able	to pay expense	es list	ed in S			
	Spe	city:						11.	+\$	0.00
12	Δdd	the amount in the last column of line 10 to the amount in line 11. The res	ult ic	the	combined mon	thly i	ററേന്നല			
12.		e that amount on the Summary of Schedules and Statistical Summary of Certain								
	appl	ies						12.	\$	2,796.09
									Combii	ned
			_							y income
13.	Do y	you expect an increase or decrease within the year after you file this form	?							
		No.								
	ш	Yes. Explain:								

Official Form 106l Schedule I: Your Income page 2

Filli	n this informa	ation to identify y	our case:					
Debt	tor 1	Theresa Lyr	n Willian	าร		Chec	ck if this is:	
Debt	tor 2					_	An amended filing	ving poetpotition aboutor
	ouse, if filing)						13 expenses as of	ving postpetition chapter the following date:
Unite	ed States Bank	ruptcy Court for the	: DISTRI	CT OF DELAWARE		_	MM / DD / YYYY	
	e number nown)							
		orm 106J						
		J: Your		<b>1SES</b> . If two married people ar	e filing together, b	oth are equi	ally responsible fo	12/15
info	rmation. If n		eded, atta	ch another sheet to this				
		ribe Your House	ehold					
1.	Is this a joi							
	■ No. Go to	o line 2. es Debtor 2 live	in a sonar	ata hausahald?				
			iii a Sepai	ate nousenoid?				
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debt	tor 2.	
•				, ,	•			
2.	•	e dependents?	■ No					
	Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	e the						□ No
	dependents	names.						☐ Yes
								□ No □ Yes
								☐ Yes
								☐ Yes
								□ No
								☐ Yes
3.	expenses of	penses include of people other t nd your depende	:han _	No Yes				
Part	2: Estin	nate Your Ongoi	ing Month	y Expenses				
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp				
				government assistance in Cluded it on Schedule I: Y				
(Off	icial Form 1	061.)					Your exp	enses
4.		or home owners nd any rent for th		ses for your residence. In or lot.	nclude first mortgag	e 4. \$		1,205.00
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
		erty, homeowner'	s, or renter	's insurance		4b. \$		0.00
			•	upkeep expenses		4c. \$		100.00
_		eowner's associa				4d. \$		0.00
5.	Additional	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5. \$		0.00

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Debto	Theresa	Lynn Williams	Case number (if known	)
6. U	Itilities:			
-		, heat, natural gas	6a. \$	200.00
	•	wer, garbage collection	6b. \$	30.00
		e, cell phone, Internet, satellite, and cable services	6c. \$	200.00
	d. Other. Sp		6d. \$	0.00
_		ekeeping supplies	7. \$	400.00
		children's education costs	8. \$	0.00
		lry, and dry cleaning	9. \$	30.00
	-	products and services	10. \$	0.00
		ntal expenses	11. \$	100.00
		Include gas, maintenance, bus or train fare.	Π. Ψ	100.00
	o not include c		12. \$	200.00
		clubs, recreation, newspapers, magazines, and books	13. \$	75.00
		ributions and religious donations	14. \$	0.00
	nsurance.	g.cac acitation	🗸	0.00
		nsurance deducted from your pay or included in lines 4 or 2	0.	
	5a. Life insura		15a. \$	0.00
1	5b. Health ins	surance	15b. \$	0.00
1	5c. Vehicle in	surance	15c. \$	115.00
1	5d. Other insu	urance. Specify:	15d. \$	0.00
		nclude taxes deducted from your pay or included in lines 4 c		
	specify:		16. \$	0.00
		ease payments:		
		ents for Vehicle 1	17a. \$	500.00
		ents for Vehicle 2	17b. \$	0.00
	7c. Other. Sp		17c. \$	0.00
	7d. Other. Sp		17d. \$	0.00
		of alimony, maintenance, and support that you did not		0.00
		your pay on line 5, Schedule I, Your Income (Official Fo		
		s you make to support others who do not live with you.		0.00
	pecify:	anticonnance and included in lines 4 on F of this forms	19.	
		erty expenses not included in lines 4 or 5 of this form of	20a. \$	
		s on other property	· ——	0.00
	0b. Real estat		20b. \$	0.00
		homeowner's, or renter's insurance	20c. \$	0.00
		nce, repair, and upkeep expenses	20d. \$	0.00
		er's association or condominium dues	20e. \$	0.00
21. <b>C</b>	Other: Specify:	Work lunches	21. +\$	50.00
22. <b>C</b>	alculate your	monthly expenses		
	2a. Add lines 4		\$	3,205.00
		2 (monthly expenses for Debtor 2), if any, from Official Forr		
		a and 22b. The result is your monthly expenses.	\$	3,205.00
	20. Add III 16 22	a and 220. The result is your monthly expenses.		3,203.00
	-	monthly net income.		
		12 (your combined monthly income) from Schedule I.	23a. \$	2,796.09
2	3b. Copy you	r monthly expenses from line 22c above.	23b\$	3,205.00
_	0	and the same and t		
2		your monthly expenses from your monthly income.	23c. \$	-408.91
	rne result	is your monthly net income.	200.	
24. D	o you expect	an increase or decrease in your expenses within the ye	ar after you file this form?	
F	or example, do ye	ou expect to finish paying for your car loan within the year or do you		crease or decrease because of a
		terms of your mortgage?		
	No.			
Г	☐ Yes.	Explain here:		

### Case 20-10001-BLS Doc 1 Filed 01/01/20 Page 49 of 57

Filli	n this information to identify your o	ase:			
Deb					
<b>D</b>	First Name	Middle Name	Last Name		
Deb (Spou	or 2 se if, filing) First Name	Middle Name	Last Name		
Unit	d States Bankruptcy Court for the:	DISTRICT OF DELAWA	RE		
Cas	number				
(if kno				_	c if this is an
				amen	ded filing
	cial Form 106Sum				
			d Certain Statistical Information are filing together, both are equally responsible for		12/15
infor	nation. Fill out all of your schedule	s first; then complete the	e information on this form. If you are filing amend		
your	original forms, you must fill out a n	ew <i>Summary</i> and check	the box at the top of this page.		
Part	1: Summarize Your Assets				
				Your a	ssets of what you own
	- · · · · · · - · · · · · · · · · · · ·			value	or what you own
1.	Schedule A/B: Property (Official Fo 1a. Copy line 55, Total real estate, fro	rm 106A/B) om Schedule A/B		\$	245,000.00
	1b. Copy line 62, Total personal prop	erty, from Schedule A/B		\$	30,230.00
	1c. Conviline 63. Total of all property	on Schedule A/R		\$	,
	Tc. Copy line 65, Total of all property	On Scriedule A/B		Ψ	275,230.00
Part	2: Summarize Your Liabilities				
					abilities t you owe
0	Calcadula D. Oraditara Mila I Iawa Ol	in Comment has Brown and	(Official Form 400D)	7 tillouri	it you owe
2.	Schedule D: Creditors Who Have Cla 2a. Copy the total you listed in Colum		he bottom of the last page of Part 1 of <i>Schedule D</i>	\$	206,254.00
3.	Schedule E/F: Creditors Who Have L	Insecured Claims (Official	Form 106E/F)		0.00
	3a. Copy the total claims from Part 1	(priority unsecured claims	s) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2	(nonpriority unsecured cla	aims) from line 6j of Schedule E/F	\$	169,325.42
			Your total liabilities	\$	375,579.42
Dout	Communication Value Incomes and	F.v			
Part	3: Summarize Your Income and	Expenses			
4.	Schedule I: Your Income (Official For Copy your combined monthly income		I	\$	2,796.09
5.	Schedule J: Your Expenses (Official				
O.	,	,		\$	3,205.00
Part	4: Answer These Questions for A	Administrative and Statis	stical Records		
6.	Are you filing for bankruptcy unde	r Chapters 7, 11, or 13?			
	☐ No. You have nothing to report of the control of the contro	on this part of the form. Ch	neck this box and submit this form to the court with yo	ur other scl	hedules.
	Yes				
7.	What kind of debt do you have?				
			lebts are those "incurred by an individual primarily for g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or
	Your debts are not primarily o		e nothing to report on this part of the form. Check this	s box and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Theresa Lynn Williams

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,769.23

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	84,508.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	84,508.00

Fill in this inforn	nation to identify your	case:		
Debtor 1	Theresa Lynn Wi	lliams		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
(Spouse II, IIIIIIg)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF DELAWARE		
Case number _				
(if known)				☐ Check if this is an
				amended filing
Official Form	106Dec			
	-	n Individual Da	btor's Cobodules	
Declarat	ion About a	in individual De	btor's Schedules	12/15
If two married ne	onle are filing togethe	r hoth are equally responsible	for supplying correct information.	
ii two iiiairica pe	opic are ming togethe	i, both are equally responsible	tor supplying correct information.	
			nended schedules. Making a false sta	
	or property by fraud ii 3 U.S.C. §§ 152, 1341, 1		y case can result in fines up to \$250,	000, or imprisonment for up to 20
,	33,, -	,		
Sign	Below			
Did you pay	y or agree to pay some	one who is NOT an attorney to	help you fill out bankruptcy forms?	
■ No				
— □ Yes. N	lame of person		Attach Po	ankruptcy Petition Preparer's Notice.
☐ Tes. N	aine or person			on, and Signature (Official Form 119)
				,
Hadan sasal		About I bears and the assument		tion and
	true and correct.	that I have read the summary	and schedules filed with this declara	tion and
_				
	resa Lynn Williams		X Signature of Debtor 2	
	a Lynn Williams e of Debtor 1		Signature of Debtor 2	
Oigilatui	O O. DODIO! I			
Date <b>J</b>	lanuary 1, 2020		Date	

Official Form 106Dec

Fill in	this information to identify your case:				directed in this form and	in Form
Debt	Theresa Lynn Williams		122A-1S	upp:		
Debt (Spous	or 2 e, if filing)		<b>■</b> 1. 1	There is no pres	sumption of abuse	
Unite	d States Bankruptcy Court for the: District of Delawar	re		applies will be r	to determine if a presum made under <i>Chapter 7 M</i> ficial Form 122A-2).	
Case (if know	number			,	•	anuan of
(	,				t does not apply now bed y service but it could app	
			☐ Ch	neck if this is a	an amended filing	
Offi	<u>cial Form 122A - 1</u>					
Ch	apter 7 Statement of Your Cur	rrent Monthly Ir	ncom	е		12/19
attach case r	complete and accurate as possible. If two married people as a separate sheet to this form. Include the line number to wounder (if known). If you believe that you are exempted frowing military service, complete and file Statement of Exempted Calculate Your Current Monthly Income	which the additional information a presumption of abuse be	on applies	a. On the top of a	ny additional pages, write marily consumer debts or	your name and because of
1.	What is your marital and filing status? Check one or	nly.				
	■ Not married. Fill out Column A, lines 2-11.					
	☐ Married and your spouse is filing with you. Fill ou					
	☐ Married and your spouse is NOT filing with you.	You and your spouse are:				
	Living in the same household and are not lega					
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are living apart for reasons that do not include evading	legally separated under nonl	oankrupto	cy law that appli	es or that you and your	
10 the	in the average monthly income that you received from all (10A). For example, if you are filing on September 15, the 6-m 6 months, add the income for all 6 months and divide the total buses own the same rental property, put the income from that p	nonth period would be March 1 t I by 6. Fill in the result. Do not in	hrough Au clude any	gust 31. If the ame income amount m	ount of your monthly income nore than once. For example	e varied during e, if both
			Colui Debt		Column B Debtor 2 or non-filing spouse	
	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commissions (before	all \$	3,769.23	\$	
	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	payments from a spouse if	\$	0.00	\$	
	All amounts from any source which are regularly pa of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a sp filled in. Do not include payments you listed on line 3.	. Include regular contribution d, your dependents, parents	ns ,	0.00	\$	
	Net income from operating a business, profession,	or farm	· —		*	
	, ,	Debtor 1				
	Gross receipts (before all deductions)	\$0.00				
	Ordinary and necessary operating expenses	-\$ 0.00	_			
	Net monthly income from a business, profession, or far	m \$0.00 Copy here	· <b>-&gt;</b> \$	0.00	\$	
6.	Net income from rental and other real property	Debtor 1				
	Oraca receipts (hefers all de diretiens)	\$ 0.00				
	Gross receipts (before all deductions) Ordinary and necessary operating expenses	-\$ 0.00				
	Net monthly income from rental or other real property	\$ 0.00 Copy here	·->\$	0.00	\$	
	Interest dividends and royalties	¥	\$	0.00	\$	

Official Form 122A-1

7. Interest, dividends, and royalties

Case number (if known)

				Column A		Colun			
			1	Debtor 1			or 2 or iling spo	ouse	
8.	Unemployment compensation		;	\$	0.00	\$			
	Do not enter the amount if you contend that the amount received was a benefithe Social Security Act. Instead, list it here:	it under	r						
	For you\$\$	00							
	For your spouse \$								
9.	Pension or retirement income. Do not include any amount received that wa benefit under the Social Security Act. Also, except as stated in the next senter not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injuridisability, or death of a member of the uniformed services. If you received any pay paid under chapter 61 of title 10, then include that pay only to the extent the does not exceed the amount of retired pay to which you would otherwise be exifted under any provision of title 10 other than chapter 61 of that title.	nce, do e ry or retired hat it	b	\$	0.00	\$			
10.	<b>Income from all other sources not listed above.</b> Specify the source and an Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international domestic terrorism; or compensation, pension, pay, annuity, or allowance paid	or d by the	Э						
	United States Government in connection with a disability, combat-related injuring disability, or death of a member of the uniformed services. If necessary, list of sources on a separate page and put the total below.								
	•			\$	0.00	\$			
	<del></del>			\$	0.00	\$			
	Total amounts from separate pages, if any.	+		\$	0.00	\$			
11.	<b>Calculate your total current monthly income.</b> Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$	3,	,769.23	+			\$	3,769.23
Part	2: Determine Whether the Means Test Applies to You								
12.	Calculate your current monthly income for the year. Follow these steps:  12a. Copy your total current monthly income from line 11			Сору	y line 11 h	nere=>	[	\$	3,769.23
12.	12a. Copy your total current monthly income from line 11			Сору	y line 11 h	nere=>			
12.				Сору	y line 11 h	nere=>	12b. [	<b>x</b>	
	12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)			Сор	y line 11 h	nere=>		<b>x</b>	12
	12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form			Сор	y line 11 h	nere=>		<b>x</b>	12
	12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  Calculate the median family income that applies to you. Follow these step			Сор	y line 11 ł	nere=>		<b>x</b>	12
	12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  Calculate the median family income that applies to you. Follow these step Fill in the state in which you live.  DE  Fill in the median family income for your state and size of household.	s:						<b>x</b> *	12
13.	12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  Calculate the median family income that applies to you. Follow these step Fill in the state in which you live.  DE  Fill in the number of people in your household.  1  To find a list of applicable median income amounts, go online using the link specific properties.	s:					12b. [	<b>x</b> *	12 <b>45,230.76</b>
13.	12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  Calculate the median family income that applies to you. Follow these step Fill in the state in which you live.  DE  Fill in the number of people in your household.  To find a list of applicable median income amounts, go online using the link so for this form. This list may also be available at the bankruptcy clerk's office.	os: Decified	 ni b	the separa	ate instruc	tions	12b. [:	<b>x</b> *	12 <b>45,230.76</b>
13.	12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  Calculate the median family income that applies to you. Follow these step Fill in the state in which you live.  DE  Fill in the number of people in your household.  To find a list of applicable median income amounts, go online using the link sport this form. This list may also be available at the bankruptcy clerk's office.  How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, chemical income in the second income income amounts.	eck box	d in	the separa	ate instruc	tions ption of	12b. [:	<b>x</b>	12 45,230.76 54,589.00
13.	12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  Calculate the median family income that applies to you. Follow these step Fill in the state in which you live.  DE  Fill in the number of people in your household.  To find a list of applicable median income amounts, go online using the link so for this form. This list may also be available at the bankruptcy clerk's office.  How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 2, Go to Part 3 and fill out Form 122A–2.	eck box	d in	the separa	ate instruc	tions ption of	12b. [:	<b>x</b>	12 45,230.76 54,589.00
13.	12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  Calculate the median family income that applies to you. Follow these step Fill in the state in which you live.  DE  Fill in the number of people in your household.  To find a list of applicable median income amounts, go online using the link so for this form. This list may also be available at the bankruptcy clerk's office.  How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 2, Go to Part 3 and fill out Form 122A–2.	eck box	d in	the separa , There is r	nte instruct	tions ption of determin	12b.	<b>x</b>	12 45,230.76 54,589.00
13.	12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  Calculate the median family income that applies to you. Follow these step Fill in the state in which you live.  DE  Fill in the number of people in your household.  1 Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link spror this form. This list may also be available at the bankruptcy clerk's office.  How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check do a compare 122A-2.  14b.  Line 12b is more than line 13. On the top of page 1, check box 2 compare 13. Sign Below	eck box	d in	the separa , There is r	nte instruct	tions ption of determin	12b.	<b>x</b>	12 45,230.76 54,589.00
13.	12a. Copy your total current monthly income from line 11  Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the form  Calculate the median family income that applies to you. Follow these step Fill in the state in which you live.  DE  Fill in the number of people in your household.  1 To find a list of applicable median income amounts, go online using the link storn this form. This list may also be available at the bankruptcy clerk's office.  How do the lines compare?  14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 2, Go to Part 3. Do NOT fill out or file Official Form 122A-2.  14b.  Go to Part 3 and fill out Form 122A-2.  Sign Below  By signing here, I declare under penalty of perjury that the information or	eck box	d in	the separa , There is r	nte instruct	tions ption of determin	12b.	<b>x</b>	12 45,230.76 54,589.00

Theresa Lynn Williams

Debtor 1

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Debtor 1	Theresa Lynn Williams	Case number (if known)	
	MM/DD/YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Debtor 1 Theresa Lynn Williams Case number (if known)

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 07/01/2019 to 12/31/2019.

#### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Premier PT

Income by Month:

6 Months Ago:	07/2019	\$3,432.69
5 Months Ago:	08/2019	\$4,038.48
4 Months Ago:	09/2019	\$3,432.69
3 Months Ago:	10/2019	\$3,836.54
2 Months Ago:	11/2019	\$4,038.46
Last Month:	12/2019	\$3,836.54
	Average per month:	\$3,769.23

#### United States Bankruptcy Court District of Delaware

		District of Delaware				
In re	Theresa Lynn Williams		Case No.			
		Debtor(s)	Chapter	7		
	VERIFICAT					
The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.						
Date:	January 1, 2020	/s/ Theresa Lynn Williams				
		Theresa Lynn Williams				

Signature of Debtor

Theresa Lynn Williams 153 Boggs Run Dover, DE 19904

Theresa Lynn Williams Case 20-10001-Bel Sne Dog fal Filed 01/01/20 Page 57 by Froperties

Attn: Bankruptcy 270 Beiser Blvd Dover, DE 19904 c/o Law Office of Patrick Scanlon

203 NE Front Street

Suite 101

Milford, DE 19963

Christina Pappoulis Gregory & Pappoulis 5307 Limestone Rd. Suite 103 Wilmington, DE 19808 Deptartment Store National Bank/Macy's Attn: Bankruptcy 9111 Duke Boulevard Mason, OH 45040 State Collection Service Attn: Bankruptcy Po Box 6250 Madison, WI 53716

Amex Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998 Discover Financial Attn: Bankruptcy Department Po Box 15316 Wilmington, DE 19850 Sun Wise Family Dermatology 111 W Main Street Suite 201 Middletown, DE 19709

Amex/Bankruptcy Correspondence/Bankruptcy Po Box 981540 El Paso, TX 79998 First State Orthopaedics 4745 Ogletown Stanton Rd. Suite 225 Newark, DE 19713 Svo Portfolio Services Attn: Loan Servicing Administration 9002 San March Court Orlando, FL 32819

Bank of America 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634 Flagstar Bank Attn: Bankruptcy 5151 Corporate Drive Troy, MI 48098 Synchrony Bank/Care Credit Attn: Bankruptcy Dept Po Box 965060 Orlando, FL 32896

Barclays Bank Delaware Attn: Correspondence Po Box 8801 Wilmington, DE 19899 Kent Diagnostic Radiology Assoc PO Box 3798 Peoria, IL 61612-3798

USDOE/GLELSI Attn: Bankruptcy Po Box 7860 Madison, WI 53707

Bayhealth Medical Center 21 West Clarke Avenue P.O. Box 199 Milford, DE 19963-0199 Kohls/Capital One Attn: Credit Administrator Po Box 3043 Milwaukee, WI 53201

Bmw Bank Of North Amer Attn: Bankruptcy Po Box 3608 Dublin, OH 43016 Midland Fund Attn: Bankruptcy 350 Camino De La Reine Ste 100 San Diego, CA 92108

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850 Parker Run BC Communities 4905 Mermaid Blvd Wilmington, DE 19808

Dedicated to Women 200 Banning St., Suite 320 Dover, DE 19904

Paths Representative 1352 Marrows Road Suite 110 Newark, DE 19711